Overview of the Annual Performance Report Development:

The data used to measure this indicator is taken from site visits that occurred between March and July 2006, of programs that are part of Cycle 3 (of Arizona's five-year site visit cycle). These programs are located primarily in Northern Arizona (Coconino, Apache and Navajo Counties and the Navajo Nation). In each site visit a minimum of 2 files per service coordinator were reviewed using the child file audit tool, which provided the data for this indicator. If necessary, the monitoring team reviewed additional files.

The actual target data were presented at a stakeholders meeting on January 12, 2007, at which time improvement activities completed and progress in meeting the target were discussed. The State will report on its website in late March 2007, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State on the target in the SPP.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a) (3) (A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2005	60%

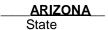
Actual Target Data for FFY 2005: 48%

Cycle 3 Programs – 48% (28/58 files reviewed) compliance
Distribution across counties and programs included in Cycle 3
Coconino County: 61% compliance

Program 1: 100% compliance (4/4 files)
Program 2: 100% compliance (8/8 files)
Program 3: 50% compliance (6/12 files)
Program 4: 14% compliance (1/7 files)

Apache and Navajo Counties: 38% compliance

Program 5: 14% compliance (1/7 files) Program 6: 50% compliance (1/2 files) Program 7: 57% compliance (4/7 files)



Navajo Nation: 27% compliance

Program 8: 27% compliance (3/11 files)

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

Cycle 3 Discussion:

For the Cycle 3 monitoring data submitted in this Indicator, DES/AzEIP had defined timely as when all early intervention services on the IFSP are provided in accordance with the Planned Start Date noted on the IFSP. While some services may have started in accordance with the Planned Start date, the item was considered noncompliant if **all** IFSP services were not provided in accordance with the Planned Start date.

The data submitted does not consider the reasons for which services were not timely, such as exceptional family or other circumstances, as the site reviews occurred prior to OSEP's clarification that states should gather "exceptional circumstances" data for this Indicator. A revision to the monitoring tools to capture this data accurately is being undertaken.

Coconino County:

While the overall Cycle 3 data was below the States Measurable and Rigorous Target, Coconino County, as a whole at 61%, met the target of 60%. Further analysis of the county reveals that two programs (Programs 1 and 2) were in full compliance (100%), thus lifting the percentage of the county as a whole. These two programs have consistently attended State and Local AzEIP- sponsored regional and State trainings. Evidence from site reviews and other data for these programs suggests a high level of compliance with AzEIP policies and procedures, a thorough understanding of the AzEIP program and strong positive relationships with the participating agencies.

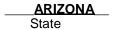
There are two programs within Coconino County that have not met the target of 60% (Programs 3 and 4). Their data and information gathered during the site visits show a lack of understanding of the requirements for participating agencies within the AzEIP structure; targeted technical assistance is being undertaken to assist these programs.

The 50% compliance level demonstrated by programs is largely the result of a failure to document the actual start date of services in the child's files, as well as not ensuring that quarterly progress reports were sent, which would have included the start dates. Program 3 has hired a new Supervisor who is focusing work on this item, as well as other items on the program's corrective action plan (CAP). Since July, there have been monthly meetings to address the timely provision of services and effective communication. The Continuous Quality Improvement (CQI) Coordinator and Technical Assistance and Monitoring Specialists (TAMS) provide assistance as questions of implementation arise.

Program 4 had a total of seven open files at the time of the site visit, all of which were reviewed using the child file audit. The reviewers included Program 4 local staff, as well as staff from their contracting State agency, and DES/AzEIP Staff. The service coordinator for Program 4 expressed a lack of understanding of the procedures for accessing Medicaid funds, thus elongating the timelines for services. The contracting State agency provided immediate technical assistance and offered continued support.

Progress Update for Coconino County

The most recent progress report for Program 3 shows an increase in compliance from 50% to 60% compliance.



Apache and Navajo Counties

Based on site review data, Apache and Navajo Counties did not meet the target of 60%. Program 5 showed the lowest percentage for timely services. The majority of children waiting for services in this county were those children who lived furthest away from the hub of the local communities, such as the White River Reservation. In addition, the service coordinators were not documenting the actual start date in the child's file and were not ensuring that their contracted providers submitted the quarterly progress reports, as required in their contracts. The monitoring team provided onsite technical assistance related to the specific service coordination functions for ensuring timely provision of services.

Progress Update for Apache and Navajo Counties

Progress reports received after the reporting period ended for Program 5 have not shown improvement, and this program reports a turnover in staff since the site review. Continued Technical Assistance (TA) is being provided. The last quarterly reports for Programs 6 and 7 under their respective CAPs, received in December 2006, report improvement for both programs to 100% compliance. Plans to visit the area to provide additional training and verify program data is scheduled for early 2007.

Navajo Nation

Program 8 did not meet the target of 60%; only 3 out of the 11 files reviewed were compliant. In addition to lack of documentation for start dates and a lack of understanding of the role to ensure timely services, programs report a shortage of therapists on the Navajo Nation, particularly in the more rural areas of the Nation. DES/AzEIP provided intensive full-day trainings to the Navajo Nation in July and October 2006. In addition, the new Program 8 supervisor regularly communicates with the CQI Coordinator and TAMS as questions arise.

Progress Update for Navajo Nation

In the latest progress report, received December 2006, timely provision of services was reported at 50%. This is less than the target of 60% but does show an increase in compliance from the original data of 27%.

Statewide Discussion Including SPP Improvement Activities:

Improvement Activities	Timelines	Status
Revise and expand policies and procedures related to timely service provision		
Align policies and procedures across all agencies and providers regarding timely service provision.	February 2006	Revised Strategy. See description below and proposed new improvement activities.
Disseminate and implement revised policies and procedures related to timely service provision across the service providing agencies.	February 2006 and ongoing.	Revised Strategy. See description below and proposed new improvement activities.
Monitor through CQIMS (see Indicator #9) to ensure implementation of policies and procedures.	March 2006 and ongoing.	Revised Strategy. See description below.

In June 2005, the Arizona Department of Economic Security (DES) requested, and the Office of Special Education Programs (OSEP) approved, revision of two Compliance Agreement

work plan objectives related to the alignment of policies and procedures across agencies to ensure compliance with IDEA, Part C; specifically the 45-day timeline and timely service provision. The AzEIP agency partners, specifically DES/DDD, ADHS/OCSHCN and ASDB, agreed that, rather than review agency policies and procedures and revise to align with IDEA, Part C and AzEIP, it would be more effective and expedient for DES/AzEIP to prepare policies and procedures to replace agencies' existing policies and procedures related to early intervention. This approach for aligning policies ensures that the elements of general supervision are addressed consistently.

Policies and procedures regarding the 45-day timeline and timely provision of services were prepared to align with the interagency team-based model (a.k.a. the AzEIP Redesign) and published for public comment February 15, 2006 through April 19, 2006. At that time, implementation of the Redesign was considered to be feasible within nine months. In order to avoid creating confusion within the early intervention community by issuing policies that align with the team-based service model prior to implementing the contracts that support team-based practice, or, conversely, issuing policies and procedures that reflect the current system, when the community's focus was on the team-based model, DES/AzEIP, with approval from the OSEP, decided to coordinate implementation of the finalized team-based policies, which address 45-day timeline and timely service provision, with implementation of the AzEIP Redesign.

As an alternate mechanism for clarifying requirements for the 45-day timeline, which is an existing contract and policy requirement, and for timely service provision, DES/AzEIP emphasized the 45-day timeline requirement and timely service provision in monitoring and program-specific technical assistance to address non-compliance. DES/AzEIP analyzed 45-day timeline data to determine compliance, implemented focused monitoring, and identified and evaluated technical assistance (see Indicator 7 for additional description).

Additionally, DES/AzEIP prepared a Technical Assistance Bulletin Series (TABS) setting out its policy on the 45-day timeline and timely service provision, which was shared in draft form during Regional Quarterly meetings throughout the State between October and December 2006. The Regional Quarterly meetings are designed to provide training and technical assistance on AzEIP policies, procedures, and best practice to early intervention professionals employed or contracted by DES/AzEIP, DES/ Division of Developmental Disabilities (DES/DDD), Arizona State Schools for the Deaf and the Blind (ASDB) and/or the Arizona Department of Health Services/Office of Children with Special Health Care Needs (ADHS/OCSHCN). Nine Regional Quarterly meetings were attended by approximately 350 service coordinators, providers, and other early childhood members statewide. Additionally, during the first quarter of 2007, Regional Quarterly Trainings are also focused on timely provision of services (as well as the 45 day timeline) and the roles of service coordinators and other team members in ensuring families receive their services in a timely manner.

The draft TABS was submitted to OSEP in fall 2006 for review and DES/AzEIP was advised that specific elements needed to be removed or revised. Upon revision and further review, DES/AzEIP proposed to evaluate compliance with "timely" in a different way, though still in accordance with OSEP guidance.

Improvement Activities	Timelines	Status
Evaluate the scope of system capacity issues		
Meet with Standards of Practice contractor [Arizona Staff Development and Training	December 2005, 2006	Completed. Annual review necessary.

Project (ASDTP)] to review and, as needed, revise the AzEIP Program Registration/Personnel Registry to accurately capture personnel providing early intervention.		
Evaluate the number of therapists involved in the provision of early intervention services.	December 2005	Completed.
Conduct an analysis of current market rates for therapies (national therapy rates, the AzEIP participating agencies' rates, public and private insurance, and public schools).	January 2006	Completed.

DES/AzEIP modified the methodology used to capture personnel data for 618 Personnel data (Table 5). In addition to collecting data regarding the full-time equivalent (FTE) for each service by discipline, DES/AzEIP gathered the number of individuals actually providing services so that the State could better understand the proportion of time that professionals currently dedicate to early intervention services.

The 618 Personnel data collected in 2005 for full-time equivalents in each discipline on December 1, 2004 shows an increase in FTEs for therapists from the previous three years. Since 2002, the number of FTEs for occupational therapists has increased 8.8%, physical therapists 4.8%, and speech language pathologists 15.0%. The data reveals a decrease in FTEs in these three categories from 2003 to 2004, despite this overall increase from 2002. Arizona also gathered data as of December 1, 2004 regarding the number of persons filling the FTEs reported. That data revealed: 191 persons fill 65.4 FTEs for Occupational Therapy (OT); 162 persons fill 53.3 FTEs for Physical Therapy (PT); and 294 persons fill 89.2 FTEs for Speech/Language Pathology (SLP). Given the statewide growth rate overall in Arizona of 9.7% between 2000 - 2003, and its largest city's (Phoenix) ranking as the fastest growing city in the nation, Arizona must continue to increase its statewide recruitment and retention of qualified therapists, including focusing on increasing the FTE per person within disciplines.

As an integral component of the AzEIP System Redesign, DES/AzEIP and DES/DDD worked with consultants to establish fair and appropriate rates for the most frequently utilized early intervention services, including physical therapy, speech therapy, occupational therapy, service coordination and developmental special instruction. In addition, rates were developed for psychology and social work services in order to support the inclusion of these services in the Redesign. Proposed rates incorporate salary, which was projected based on data from the Bureau of Labor Statistics and state data for the same or comparable positions, Employee Related Expenses, travel, training, office rental and other factors that impact expenses. The proposed rates and rate methodology were released for public input from July 20, 2006 through September 12, 2006. DES/AzEIP and DES/DDD are reviewing all comments.

Improvement Activities	Timelines	Status
Identify and implement personnel recruitment and retention strategies		
Establish and maintain regional directories of providers that will be available to agencies and programs that are building or expanding the service-providing network.	June 2006 and annually.	Completed. Annual review necessary.
Through newsletters and conference presentations, partner with State Professional	March 2006 and annually.	Completed. Annual review necessary.



Associations to reach greater numbers of qualified personnel who are interested in providing early intervention services.		
Work with the Institutes of Higher Education (IHE) to encourage students to prepare for the field of early intervention, recruit new graduates, and incorporate the AzEIP Standards of Practice requirements into preservice curricula.	December 2005 and annually.	Completed. Annual review necessary.

Regional directories for all areas of the State have been developed and are maintained by Local Program Coordinators. DES/AzEIP and Local Program Coordinators utilize the directories to share agency and provider information with prospective service providers and to increase collaboration and teaming among current providers. To supplement the regional directories as a tool to match potential candidates with early intervention service providing organizations, DES/AzEIP instituted a process to regularly distribute announcements of available early intervention positions throughout the State, and to post basis information about potential candidates and the types of positions/roles (i.e., Speech Language Pathologist) that they seek.

DES/AzEIP has engaged in multiple activities to build partnerships with Arizona Professional Associations. DES/AzEIP has worked with the Arizona Speech-Language Hearing Association, the Arizona Physical Therapy Association, the Arizona Occupational Therapy Association, and the Arizona Occupational Therapy Board of Examiners to provide information about personnel qualifications and the new team-based model of service delivery via presentations at annual member meetings and/or Board meetings, exhibit tables, newsletter features, and website information. The goal has been to engage the organizations and its members in the Redesign of AzEIP and promote early intervention employment/contracting opportunities.

DES/AzEIP coordinated with Northern Arizona University and Arizona State University to verify alignment of their respective curriculums with the AzEIP Standards of Practice, to ensure that graduates of each program could begin employment with verification that the requirements had been met. Guidance was provided to ensure additional topics were included to meet the requirements. Both universities now offer an undergraduate certificate in Early Intervention.

DES/AzEIP participated on the Advisory Committee for the Arizona University Center on Disabilities at Northern Arizona University, Institute for Human Development to develop outcomes for its grant proposal. The committee assisted the UCEDD program director to develop goals in each of the core functions of community service, pre-service, research and training. DES/AzEIP emphasized the shortage of personnel, particularly in the rural areas of Arizona, during the meetings and engaged in discussions of strategies to address this need.

Improvement Activities	Timelines	Status
Implement a team-based service delivery model that ensures compliance with timely identification of infants and toddlers with disabilities and provision of services to infants and toddlers with disabilities and their families while maximizing personnel resources.		
Draft team-based service delivery model that ensures compliance and maximizes personnel resources.	December 2005	Completed.
Facilitate broad public review and comment on the proposed service delivery model.	March 2006	Completed.
Implement an interagency plan to support the proposed model of service delivery, including the establishment of new contracts and/or the revision of policies and procedures.	December 2006	Activity is not within the reporting period. Timeline revision requested.
Evaluate efficacy of team-based model.	July 2007 and ongoing through 2010.	Activity is not within the reporting period. Timeline revision requested.

DES/AzEIP, DES/DDD, the Arizona State Schools for the Deaf and the Blind (ASDB) and ADHS/OCHSHCN conducted statewide community discussions in fall 2004, to obtain broad community input about the design of a team-based model. Based on community responses to questions such as, "How do we support early intervention providers to work as teams?" and "Which disciplines should be involved?" DES/AzEIP and DES/DDD published a proposed service methodology in April 2005 describing the team-based model that would consolidate service delivery networks administered by DES/AzEIP and DES/DDD. ASDB and ADHS/OCSHCN continued to work with DES/AzEIP and DES/DDD to define their role within the Redesign process.

DES/AzEIP and DES/DDD conducted more than twenty additional forums throughout the State between April 2005 and August 2005 to gather input on the proposed service methodology. DES/AzEIP and DES/DDD engaged families by conducting forums for families and two articles written by an ICC parent were included in "Connecting with AzEIP," (a newsletter within Raising Special Kids' newsletter, "Connecting,") published April 2005 to November 2005, for online and statewide mail distribution. Input was gathered and revisions made to the proposed service specifications, and implications for rate setting were considered.

DES/AzEIP and DES/DDD convened eleven full-day trainings with Dathan Rush, CCC-SLP and M'Lisa Sheldon, PT, PhD; national experts in team-based early intervention services, between August 2005 and August 2006. Trainings, held in Phoenix, Tucson, Prescott, and Flagstaff, initially provided foundational information about the evidence-based approach, and then graduated to more technical content about implementation of the model. Trainings established a foundation for people to understand the State's direction and the supporting research, in order to facilitate more meaningful participation in the Redesign discussion.

Policies and procedures that further define and operationalize the proposed team-based service delivery model were prepared and published for public comment with the Application for Federal Funds, February 15, 2006 through April 19, 2006.



DES/AzEIP and DES/DDD published the proposed service specifications (incorporating comments from the April to August 2005 input period), regions, rates, and rate methodology for public review and final input on July 21, 2006. The comment period was extended from August 11, 2006 to September 12, 2006 in response to provider requests for additional time.

Improvement Activities	Timelines	Status
Update IFSP form and related procedures, as needed, to align with SPP indicators and IDEA 2004 requirements		
Revise IFSP to: • clarify "Start Date" as "Planned Start Date;" and • clarify initial vs. completed IFSP.	January 2006 – March 2006	IFSP was revised to clarify and document "planned start date" and "actual start date." After exploration, the State decided not to clarify initial vs. completed IFSP. SPP revision requested.
Disseminate revised IFSP form with guidance.	March 2006	Completed Fall 2006 to become effective January 1, 2007.

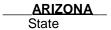
The Individualized Family Service Plan (IFSP) and IFSP Guidance document were revised to facilitate IFSP team focus on families' priorities and interests, routines, and resultant functional outcomes. In addition, the IFSP and Guidance document were revised to (1) support new approaches to evaluation, eligibility determination and assessment, (2) document "planned start date" and "actual start date" to enable tracking of timeliness of service provision, (3) include transition steps and services, and (4) document dissemination of the family survey annually. The IFSP and Guidance document were revised with input from the Interagency Coordinating Council (ICC), the AzEIP service providing agencies and contractors.

DES/AzEIP staff and the Technical Assistance and Monitoring Specialists (TAMS) conducted nine Regional Quarterly meetings throughout the State in the fourth Quarter of 2006. Regional Quarterly meetings are designed to provide training and technical assistance on AzEIP policies, procedures and best practice to early intervention professionals employed or contracted by the Department of Economic Security/ Arizona Early Intervention Program (DES/AzEIP), DES/ Division of Developmental Disabilities (DES/DDD), Arizona State Schools for the Deaf and the Blind (ASDB) and/or the Arizona Department of Health Services/Office of Children with Special Health Care Needs (ADHS/OCSHCN). Approximately 350 service coordinators, providers, and other early childhood members participated statewide. The primary subject of the first series of Regional Quarterly Trainings was the IFSP. The second series of Regional Quarterly trainings, which began in January 2007, also has a focus on timely provision of services as referenced previously. In addition to the Regional Quarterly Trainings, training and technical assistance on integrated summaries of development and functional outcomes has been provided to programs, that must improve IFSP processes and/or practices as determined through the monitoring system.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005

Improvement Activities	Timelines	Resources
Implement a team-based service delivery model that ensures compliance with timely identification of infants and toddlers with disabilities and provision of services to infants and toddlers with disabilities and their families while maximizing personnel resources.		
Implement an interagency plan to support the proposed model of service delivery, including the establishment of new contracts and/or the revision of policies and procedures.	June 2008	Executive Director, State Interagency Team, DES/AzEIP Staff.
Evaluate efficacy of team-based model.	December 2008 and ongoing through	
Justification for Revisions to Timelines: Implementation of the AzEIP redesign has been delayed for an unknown period of time, while essential infrastructure, such as automated systems, foundational training and technical assistance are established. As such, a change in the timeline for this activity is needed.	2010.	
Implement procedures for AzEIP service providing agencies to monitor files to collect data on timely provision of services, with a drill down for non-timely services, including reasons. New activity	February 2007 and quarterly through February 2008; biannually thereafter.	CQI Coordinators and TAMS.
Provide additional technical assistance on policy and procedures, including timelines, for using all funding sources such as Medicaid funds. New activity	July 2007	CQI Coordinators and TAMS.
Explore and provide written clarification, as appropriate, for AzEIP participating agencies' guidance to assist families to access timely services. New activity	December 2007 and annually.	Executive Director, CQI Coordinators and Comprehensive System of Personnel Development (CSPD) Coordinator.
Provide technical assistance on communication mechanisms for accessing available providers and documenting start dates. New activity	September 2007	CQI Coordinators and TAMS.
Conduct regional meetings to provide training and technical assistance on policies, procedures, and best practice to early intervention professionals. New activity	October 2006 and ongoing.	CQI Coordinators, TA Specialist, CSPD Coordinators, TAMS.
Original: Revise and expand policies and procedures related to timely service provision Align policies and procedures across all agencies and providers regarding timely service provision.	February 2006	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team and TA and Monitoring Specialist. CQI Coordinators, CSPD

Disseminate and implement revised policies February 2006 and Coordinator, Executive and procedures related to timely service ongoing. Director, State Interagency provision across the service providing Team and TA and agencies. Monitoring Specialist. Coordinator, Executive Monitor through the Continuous Quality Director, State Interagency Improvement and Monitoring System March 2006 and Team and TA and (CQIMS) (see Indicator #9) to ensure Monitoring Specialist. ongoing. implementation of policies and procedures. CQI Coordinators, CSPD Replace with: CQI Coordinators and October 2006 and Provide technical assistance to agencies on TAMS. timely provision of services, including policy ongoing. and procedures, through monitoring activities; Quarterly Regional meetings, and focused technical assistance. **Justification for replacement:** For the Cycle 3 monitoring data submitted in this Indicator, DES/AzEIP defined timely as when all early intervention services on the IFSP are provided in accordance with the Planned Start Date noted on the IFSP. DES/AzEIP submitted to OSEP in December 2006, its proposed change of the definition of "timely" to be 45 days from the date the parent provides consent for the IFSP. Team members have been instructed that their role to determine the start date needed by the family and noted on the IFSP will not change. The 45 day timeline will be used for federal and local reporting. but will not change the obligation of the service coordinator to ensure services in accordance with the start date on the IFSP. DES/AzEIP will use this new definition during the next cycle of on-site monitoring visits beginning in spring 2007, as well as in training during Quarterly Regional Trainings and other necessary training and technical assistance.



Overview of the Annual Performance Report Development:

The Arizona Early Intervention Program used the December 1, 2005 Table 2, Program Setting, data reported to OSEP in calculating the percentages reported here. The actual target data were presented at a stakeholders meeting on January 12, 2007. Information about improvement activities completed and progress in meeting the target was disseminated. The State will report in late March 2007, on its website, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State on the target in the SPP.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with Individualized Family Service Plans (IFSP) who primarily receive early intervention services in the home or programs for typically developing children.¹

(20 U.S.C. 1416(a) (3) (A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

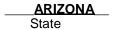
FFY	Measurable and Rigorous Target
2005	86%

Actual Target Data for FFY2005: 86%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

Arizona bases its calculation of actual target data on the number of children reported to OSEP on 618 Table 2 Program Setting data under category #2, Program Designed for Typically Developing Children and category #3 Home. In its data collection procedures, Arizona defines category #7, Other Settings, as "parks, libraries and community centers"; when the number of children served in this category are added to those served in the other two categories, then Arizona's percentage of children served in natural environments rises to 98% (4342/4450).

¹ At the time of the release of this package, revised forms for collection of 618 State reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 State reported data collections.



Across the state, progress is consistently distributed across ages and ethnicities. One county has a significantly higher rate of children served in service provider locations; this issue is being addressed through corrective action plans of service providers in that county.

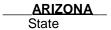
In FFY 2005-06, DES/AzEIP offered, through its partnership with the Arizona Staff Development Training Project at Northern Arizona University, trainings on the Standards of Practice modules: Child Development and Family; Initial Planning Process and the Individualized Family Service Plan; and Policies and Professionalism. The option to test out of the first two training modules was offered at three sites throughout the State on an asneeded basis. The Policies and Professionalism training was also offered throughout the State. All modules emphasize the requirement for natural environments and the perspective that providing services in natural environments supports a family's ability to enhance the growth and development of children in the context of their family's daily routines and activities.

DES/AzEIP Staff participates in the Arizona Inclusion Coalition, which was initiated after attendance at the August 2005 National Early Childhood Inclusion Institute. The Coalition continues to work on its implementation plan for its vision of including all children and their families in early learning environments by providing supports and services that are high quality, comprehensive, and collaborative.

Improvement Activities	Timelines	Status
Continued implementation of the AzEIP Standards of Practice for early intervention professionals to support understanding of early intervention in natural environments.	December 2005 with annual trainings and ongoing test options.	Completed and ongoing.
Participate in Arizona Inclusion Coalition activities to expand awareness of natural environments for early childhood programs.	December 2005 and ongoing.	Completed and ongoing.
Provide focused technical assistance to programs that do not comply with natural environments.	December 2005 and ongoing.	Completed and ongoing.
Incorporated are the improvement activities from Indicator #1 concerning the implementation and maintenance of AzEIP's team-based service delivery model.		

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2006-2010

Arizona will maintain its performance on this indicator through continuation of the improvement activities noted above. In addition, implementation of the team-based model supports the provision of early intervention services and supports in the natural environment.



NEW INDICATOR

The Arizona Early Intervention Program used entry data from June 15, 2006 (implementation date of child indicator process) through September 30, 2006 in preparing its response for this indicator. An overview of the process and entry data was presented at a stakeholders meeting on January 12, 2007. DES/AzEIP will report progress data in the APR due for FFY 2006.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a) (3) (A) and 1442)

Measurement:

- A. Positive social-emotional skills (including social relationships):
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to sameaged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

- C. Use of appropriate behaviors to meet their needs:
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

<u>Background</u>: DES/AzEIP presented the new Indicator to its statewide Initial Planning Process (IPP) Contractors, Interagency Coordinating Council, and participating state agency

representatives and received recommendations for members of a task force to discuss the overall State plan for Indicator #3. The task force included representation from the IPP contractors, AzEIP Standards of Practice trainers, a higher education institute, the Arizona State Schools for the Deaf and the Blind (ASDB), and DES/AzEIP. The task force reviewed all documents and technical assistance from the Early Childhood Outcomes (ECO) Center and researched the tool(s) and process that would best be suited for DES/AzEIP to gather entrance/exit data on the early childhood outcome indicator. DES/AzEIP determined that any broad-spectrum assessment tool that was cross-walked by ECO and approved by DES/AzEIP would be accepted, thus giving the AzEIP service providing agencies some choice in the selection of a tool.

The following procedures are used by the AzEIP community to collect and analyze the requisite data:

Overview: The State adopted the ECO Center's summary form for rating a child on the three measurements. Minor adaptations were made to the form to capture additional demographic information and change ratings from numbers to letters. The AzEIP service-providing agencies use an approved assessment tool along with parents' and others' observations and knowledge about a child, to collectively decide on a rating for each of the three measures. This procedure is conducted for all eligible children, birth to 2 years, 6 months of age as part of the initial assessment under 34 CFR 303.322. The ratings each child receives are based upon multiple sources of information, such as results of the approved tool, other evaluation or assessment tools administered, observation, parent report, informed clinical opinion, and available records. The Summary Table of Information has been incorporated into the Child Indicator Summary Form and is completed at the same time, to document and support the team's ratings. The Child Indicator Summary Form is completed by a member of the IPP team working with the family and other team members. A copy of the form is maintained in the child's record and a copy is also sent to the DES/AzEIP office.

The process and forms are completed again, at or near the child's exit from AzEIP, regardless of when the child exits (as long as s/he has been enrolled for at least six months) and regardless of the reason for transition. If the transition is a planned exit from services, the process will not be completed more than 90 days from the planned exit. If the child is potentially eligible for Part B, the process will be completed after the Comprehensive Developmental Assessment (CDA) has been conducted pursuant to the Intergovernmental Transition Agreement between DES and the Arizona Department of Education (ADE). The CDA will be prepared by a member(s) of the early intervention team working with the family in preparation for transition.

DES/AzEIP and the ADE had discussed options for coordinating the collection of data for exit from AzEIP and entry into preschool. However, since that time, DES/AzEIP and ADE have decided on different protocols for the collection of data. At this time, DES/AzEIP will share information with the ADE during the transition process, with parent consent.

DES/AzEIP collects entry data on a monthly basis from the AzEIP IPP contractors and the appropriate service providing agencies using the *Child Indicators Summary Form* created by ECO and modified by DES/AzEIP to capture children's scores on Indicator #3. The agencies are required to submit copies of the *Child Indicators Summary Form*, which includes assessment and observational data for all children made eligible, in order for DES/AzEIP to monitor implementation.

DES/AzEIP is creating a database to input entry and exit data, which will calculate the measurements required for this Indicator. This database links to current data systems of the AzEIP service providing agencies. DES/AzEIP has worked closely with AzEIP service-providing agencies to ensure that the necessary data elements needed for the new database are entered into the current data systems. The programs are encouraged to monitor their data system at least monthly, to ensure accurate and timely data collection. DES/AzEIP will be able to compare

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numbers of children made eligible to numbers of Child Indicator Summary Forms submitted, in order to monitor agency compliance with this new indicator.

<u>Training & TA</u>: In May 2006, in collaboration with staff from the ECO Center, DES/AzEIP provided Child Outcomes Trainings for AzEIP IPP contractors and service providing agencies involved in the collection of entry data: one in Southern Arizona and one in Northern Arizona,. Technical Assistance and Monitoring Specialists (TAMS) provided additional regional trainings and support to programs as they implemented the requirements. Programs began collecting entry data for all new eligible children referred on or after June 15, 2006. A follow-up phone conference for all programs was conducted in September 2006 with staff from the ECO Center, to address issues and concerns as programs began to use the tools and forms.

DES/AzEIP provided an iiTV (interactive instructional TV) training in November 2006 for all agencies involved in the on-going services to children who would be involved in exit ratings. iiTV was available at 14 sites around the State, with approximately 150 service coordinators and service coordinator supervisors in attendance. A second training for approximately 60 service coordinators in Maricopa County was provided in December 2006. The Technical Assistance and Monitoring Specialists continue to provide follow-up support to programs as they implement the requirements. Programs will begin collecting exit data for children on December 15, 2006. DES/AzEIP will include child indicators as a standing topic for discussion at all Regional Quarterly Meetings, to ensure that service providing agencies are aware of and are implementing the requirements. In addition, data submitted by programs will be analyzed with other exit data to monitor program compliance with the new requirements.

Ongoing Monitoring & Technical Assistance (TA): DES/AzEIP will continue meeting regularly to problem-solve and to monitor data as it is captured, to identify trends and themes, and to target TA and training as needed. DES/AzEIP will incorporate the above information into its Policy & Procedure Manual so that current and new providers have the written policy and procedure for implementing this plan.

Baseline Data for FFY 2004 (2004-2005):

To be submitted for FFY 2006 (2006-2007).

Entry Data:

A. Positive social-emotional skills (including social relationships).

Ratings	Number	Percentage
Overall Age-appropriate	133	51%
Overall Not Age-appropriate	129	49%

B. Acquisition and use of knowledge and skills (including early language/ communication).

Ratings	Number	Percentage
Overall Age-appropriate	107	41%
Overall Not Age-appropriate	155	59%

C. Use of appropriate behaviors to meet their needs.

Ratings	Number	Percentage
Overall Age-appropriate	84	32%
Overall Not Age-appropriate	178	68%

Overall Age Appropriate: refers to children functioning at a level comparable to same aged peers.

Overall Not Age Appropriate: refers to children functioning at a level below same aged peers.

Data from June 15, 2006 through September 30, 2006. In order to coordinate with ECO and schedule statewide trainings for the providers who would collect entry data, which occurred in May, DES/AzEIP needed to change its date set out in the SPP to begin collection of entry data from May 2006 until June 15, 2006. This additional time allowed the providers who attended the training, with the assistance of the TAMS, to train their staff.

Discussion of Baseline Data: N/A

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A for this reporting period
2006 (2006-2007)	
2007 (2007-2008)	
2008 (2008-2009)	
2009 (2009-2010)	
2010 (2010-2011)	

Improvement Activities/Timelines/Resources:

DES/AzEIP reviews all child indicator summary forms for completeness and enters the ratings into the database. Monitoring activities will ensure that AzEIP is receiving the appropriate number of summary forms by comparing the number of forms per program by the number of children found eligible. Monitoring activities will ensure that additional elements, such as county and ethnicity are representative.

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Indicator 4

NEW INDICATOR

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator – 4. Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

Measurement:

- A. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family know their rights divided by the # of respondent families participating in Part C times 100.
- B. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs divided by the # of respondent families participating in Part C times 100.
- C. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn divided by the # of respondent families participating in Part C times 100.

Overview of Issue/Description of System or Process:

Overview: DES/AzEIP reviewed the surveys created by the National Center for Special Education Accountability and Monitoring (NCSEAM) and the Early Childhood Outcomes Center. Based upon feedback from the early intervention community suggesting a one-page survey, as well as the potential for collaboration with Part B, DES/AzEIP proposed use of the NCSEAM survey. After input at its stakeholder meeting held in November 2005, DES/AzEIP decided to use the NCSEAM survey section entitled "Impact of Early Intervention Services on Your Family" for this indicator.

DES/AzEIP discussed the survey and instructions, obtaining input from stakeholders at a statewide meeting in January 2006. In March 2006, at another statewide meeting, the finalized survey and instructions were shared and discussed. In March 2006, DES/AzEIP disseminated the survey with instructions via e-mail for implementation on April 1, 2006.

The average score, recommended target data, and improvement activities were provided to a group of stakeholders and the ICC in January 2007 for input.

Description of Process:

1. The service coordinator is responsible for explaining the survey to the family in a way that is meaningful and reflective of the value of the family's input. Explaining the survey includes

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sharing with the family that the survey is important for DES/AzEIP and AzEIP providers to know how the system is working and what improvements are needed.

- 2. To ensure that all families have the opportunity to respond to the survey, the service coordinator must make efforts to provide the survey to the family, in the family's native language or other mode of communication. Written surveys are currently available in English and Spanish.
- 3. Prior to giving the family a survey, the service coordinator is responsible for completing the demographic information section at the top of the survey and reviewing this information with the family to make sure it is accurate. The family should complete "Date Completed" at the time the survey is completed.
- 4. The service coordinator is responsible for asking the family if they would like help completing the survey. Suggestions for those who might help the family include the service coordinator, other personnel within the agency, a service provider, the local program coordinator, and/or a family advocate.
- 5. The service coordinator will ensure the family is given the survey at the end of the annual IFSP and/or at the last meeting with the family prior to exiting early intervention.
- 6. A preprinted postage-paid envelope with the DES/AzEIP return address is provided to families with each survey.

DES/AzEIP created a database for the data from the family surveys. Surveys are received at the DES/AzEIP office and all information (demographic and ratings) are entered into the database. The database allows DES/AzEIP to run reports by program, county, ethnicity, and age of child at time of survey completion.

Changes from 2005 SPP Overview:

- Due to the implementation date for the survey (April 2006), DES/AzEIP received a small number of surveys for FFY 2005. DES/AzEIP changed its reporting period by expanding the date until October 2006 in order to collect and analyze a larger number of surveys to better represent the population the State serves.
- 2. In its prior submission, DES/AzEIP discussed its collaboration with ADE to utilize its database for online entry of surveys and analysis. DES/AzEIP gives families paper surveys with postage-paid envelopes, and has created a database for entry and analysis. DES/AzEIP will revisit discussions with the Arizona Department of Education to determine whether utilization of their online survey database is feasible. DES/AzEIP will also include an improvement activity to explore other online survey possibilities.

Baseline Data:

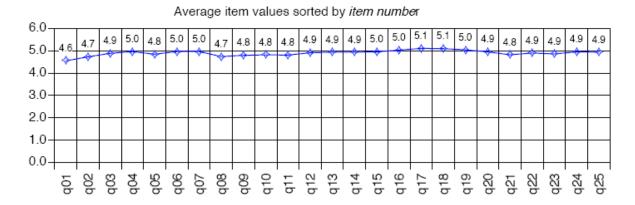
The percent of families participating in Part C, who report that early intervention services have helped the family:

A.	Know their rights	100%
B.	Effectively communicate their children's needs	100%
C.	Help their children develop and learn	100%

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Discussion of Baseline Data:

The average item values by question are set out in the chart below.



The average scores across all questions ranged from 4.6 to 5.1 across questions.

Applying a recommended standard score of 5.0 to questions, the averages for each question resulted in 100% of the families responding equal to or above the standard score for the NCSEAM questions that corresponded to the identified areas.

	Recomm- ended Standard	NCSEAM Survey question	AZ Survey Average Value
A. Know their rights.	5.0	Q16: know about my child's and family's rights concerning early intervention services.	5.0
B. Effectively communicate their child's needs.	5.0	Q15: communicate mire effectively with the people who work with my child and family.	5.0
C. Help their children develop and learn.	5.0	Q17: do things with and for my child that are good for my child's development.	5.1

DES/AzEIP received 67 surveys between April and June 2006. It expanded its reporting period to October 2006 to collect and analyze 197 surveys.

DES/AzEIP through its partnership with NAU conducted a Rasch analysis of the 197 NCSEAM family surveys received from April 2006 through October 2006. Given the small "n" value from the total number of surveys, which was further decreased as a result of eliminating surveys that did not decimate and which were incomplete, as required to conduct a Rasch analysis, DES/AzEIP does not have a sufficient confidence level to report data using this analysis.

The low number of surveys is directly related to the fact that DES/AzEIP began a new process with new forms and instruction three months prior to the end of the reporting period. In addition, it was

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learned through monitoring and at regional meetings, that the new survey and instructions had not been received by some of the service coordinators.

DES/AzEIP received surveys from families in 12 out of the 15 counties in Arizona. The three counties from which surveys were not received are rural counties and serve approximately 1.3% of the total number of children served. It could be possible that during the reporting period used (which is less than a year), no child in those counties had an annual IFSP or exited out. Technical assistance will be provided to the service coordinators in those counties to ensure use of surveys when appropriate.

DES/AzEIP compared the ethnicity and age percentages of these areas from the surveys received with the percentages from DES/AzEIP's 618 data reported for its December 1, 2005 count of children served, which provides the following information:

618 Data - 12/1/05	AZ Survey Data
	-
7.9%	4.4%
1.8%	1.6%
3.8%	3.3%
37.4%	30.8%
49.0%	58.8%
% Served by Age Using 618	AZ Survey Data
Child Count Data	
12.3%	8.0%
32.3%	37.4%
55.4%	54.4%
	7.9% 1.8% 3.8% 37.4% 49.0% % Served by Age Using 618 Child Count Data 12.3% 32.3%

When using an error rate of 3% (similar to what is used for sampling procedures), the surveys received represent the population served for Asian or Pacific Islander and Black or African American, but not for American Indian, Hispanic or Latino, or White. The surveys represent the children served ages 2-3 but not the 0-1 or 1-2 population. Given the low number of surveys received, it is difficult to do an accurate comparison to determine representation.

DES/AzEIP also analyzed the surveys by program and program within county to determine programs that had a low or no number of surveys through the reporting period. DES/AzEIP will focus on ensuring those programs are aware of and implement the survey procedures, while recognizing that it is the family's choice whether to respond.

Using the recommended standard score of 5.0, which reflects to a family response of strongly or very strongly agree, the following measurable and rigorous targets were set. The targets reflect the percentage of families that strongly or very strongly agree with the designated questions set out above from the NCSEAM survey.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A

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2006 (2006-2007)	90%
2007 (2007-2008)	85%*
2008 (2008-2009)	90%
2009 (2009-2010)	95%
2010 (2010-2011)	95%

^{*} DES/AzEIP anticipates the implementation of a comprehensive redesign and that family satisfaction may decrease during the transition to the system.

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise IFSP form to include requirement for service coordinators to explain and disseminate family survey to families at each annual IFSP.	January 2007	CQI Coordinators, TA Specialist, CSPD Coordinator and TAMS.
Revise Child File Audit to align with requirement to disseminate family survey at each annual IFSP and at or near transition.	March 2007	CQI Coordinators and TAMS.
Include requirement to disseminate family survey at or near exit on exit checklist for service coordinators.	June 2007	CQI Coordinators and TAMS.
Ensure agenda item on each quarterly regional meeting for Family Survey discussion. - review procedures for surveys; - discuss APR and local reporting of family outcomes; - provide surveys; and - receive feedback on process.	January 2007 and ongoing.	CQI Coordinators, CSPD Coordinator and TAMS.
Ongoing review of distribution of family surveys during monitoring activities.	March 2007 and with cyclical monitoring visits.	CQI Coordinators.
Monitor representativeness and completeness of surveys at least bi-annually and provide focused technical assistance to programs.	June 2007 and bi- annually thereafter.	CSPD Coordinator and CQI Coordinators.
Research structural and financial ability for online surveys. If feasible:	January 2008	Management Information Coordinator, TA

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create online capability for surveys;Implement online surveys.	March 2008 December 2008	Specialist, CSPD Coordinator and CQI
Seek technical assistance from the National Center for Special Education Accountability Monitoring (NCSEAM), in collaboration with Northern Arizona University (NAU) for considerations in analyzing the data for the next APR.	September 2007	Coordinators. CSPD Coordinator and NAU/Institute for Human Development (IHD) ASDTP Staff.

Overview of the Annual Performance Report Development:

The Arizona Early Intervention Program used the following data sources for completing this indicator:

- Arizona's December 1, 2005 Table 1, Report of Infants and Toddlers Receiving Early Intervention Services data reported to OSEP;
- ❖ OSEP Table 8-4. Infants under 1 year of age receiving early intervention services under IDEA, Part C, by age and state: 2005;
- OSEP Table 8-3c. Infants and toddlers ages birth through 2 receiving early intervention services under IDEA, Part C, by eligibility criteria, age and state: 2005; and
- OSEP Table C-2. Estimated resident population ages birth through 2, by state: 1996, 2004, and 2005.

The actual target data were presented at a stakeholders meeting on January 12, 2007, at which time improvement activities completed and progress in meeting the target were disseminated. The State will report in late March 2007, on its website, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State on the target in the SPP.

Monitoring Priority: Effective General Supervision Part C/Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005	.63%

Actual Target Data for FFY 2005: .59%

A. Comparison to other states with narrow eligibility requirements:

	T	Percentage of infants
Rank	State	under 1
1	Idaho	1.75%
2	North Dakota	1.58%
3	Oklahoma	1.35%
4	Montana	1.33%
5	District of Columbia	1.23%
6	Guam	1.13%
7	Connecticut	.93%
8	South Carolina	.78%
9	Oregon	.74%
10	Tennessee	.73%
11	Utah	.66%
12	Maine	.65%
13	Nebraska	.64%
14	Arizona	.59%
15	Georgia	.48%
16	Nevada	.47%

B. Comparison to National Data:

	2005 % of population served			
National	.95%			
Arizona	.59%			

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

Arizona's actual child count data for infants under 1 year of age (.59%) is below its target of .63% for the report year 2005-2006. Arizona has maintained reliable child count trend data since 2000; trend data show that the percentage of children under 1 served has remained fairly stable (.5% to .6%) since 2001. While 73% (11/15) of Arizona counties made progress since 2001, 20% (3/15) declined slightly, and 7% (1/15) remained static.

Of the two counties experiencing a decline in percentage of infants under 1 served two experienced population declines during that period. The third county has experienced 12% population growth since 2002. Drill down of the referral and eligibility data for infants under 1 in this county reveal that although the percentage of referrals of infants is higher than the state average, the percentage of children under 1 found eligible with an established condition is considerably lower than the state average; and the percentage of children under 1 who do not complete the eligibility process is significantly higher. These results point to a need for targeted technical assistance to the referral sources and the evaluation contractors in this county.

Rates of progress have varied across counties due to factors such as variable population growth rates.

Of the 16 states with narrow eligibility requirements, Arizona ranks 14th with regard to percentage of the birth-to-1 population served.

Targeted public awareness efforts have resulted in significant increases in the percentage of infants under 1 referred to the Arizona Early Intervention Program.

Tracking and analysis of data related to the outcome of referrals for children under 1, compared to the outcome of referrals of children 1-2 and 2-3 years of age, began in FFY2005. Baseline data reveals differences across ages and across counties. In general, the data show that most children (71%) found eligible based on an established condition were under 1 year of age, while the lowest percentage (21%) of children under 1 were found eligible based on developmental delays. In addition, most (70%) parents of eligible children who decline an IFSP have children under the age of 1, and the highest percentage (41%) of children who do not complete the evaluation/eligibility process after referral are also under the age of one. To summarize, while more children under the age of one are referred to the early intervention program, significant numbers of the families do not complete the evaluation/eligibility process, or decline to have an IFSP developed for their eligible child.

Improvement Activities	Timelines	Status
Implement strategies to support child find and service provision to infants 0-1.		
Target public awareness to primary referral sources about referring infants as required by IDEA, 2004.	December 2005 and ongoing.	Completed and ongoing.
Track and analyze data related to age of children found eligible for Part C compared to data related to age at referral.	December 2005 and ongoing.	Completed and ongoing.
Research strategies utilized by states with similar eligibility criteria for evaluating and assessing infants birth to 1.	December 2006	See Revisions with justifications.
Implement evaluation strategies identified through research.	January 2007	See Revisions with Justifications.
Identify resources for providers related to evaluation and services for premature infants and children exposed to substances.	January 2007	Begun July 2006, and continuing.
Incorporated herein are the improvement activities from Indicator #1 regarding implementation of the team-based model.		
Incorporated herein are the improvement activities from Indicator #6 regarding general public awareness, collaborative efforts, and data collection and analysis.		

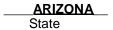
Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006-2010

Improvement Activities	Timelines	Resources
Research strategies utilized by states with similar eligibility criteria for evaluating and	July 2007	Technical Assistance and Monitoring Specialists,

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Improvement Activities	Timelines	Resources
assessing infants birth to 1.		DES/AzEIP Staff.
Justification for Revision to Timelines:		
Revised to include additions to Narrow		
Eligibility category made by OSEP in December 2006.		
Implement evaluation strategies identified	September 2007	Local Program
through research.		Coordinators, Technical Assistance and Monitoring
Justification for Revision to Timelines:		Specialists, DES/AzEIP
Revised to reflect change in related activity		Staff.
timeline above.		
Develop and/or strengthen collaboration between AzEIP child find system and regional hospital Newborn Intensive Care system, including Newborn Intensive Care Units (NICUs), Newborn Follow-up, Healthy Steps, and related programs. New activity identified by stakeholders during APR development	July 2007 through December 2008.	DES/AzEIP Staff, Technical Assistance and Monitoring Specialists, Local Program Coordinators, local Initial Planning Process contractors.
process.		<u> </u>
Conduct further drill down of data, following up	April 2007 through	Technical Assistance
on questions and hypotheses that emerged	December 2008.	Specialist, Management
from data analysis conducted 2005-2006. New		Information Coordinator.
activity		



Overview of the Annual Performance Report Development:

The Arizona Early Intervention Program used the following data sources for completing this indicator:

- Arizona's December 1, 2005 Table 1, Report of Infants and Toddlers Receiving Early Intervention Services data reported to OSEP;
- ❖ OSEP Table 8-2. Infants and toddlers ages birth through 2 receiving early intervention services under IDEA, Part C, by age and state: 2005;
- OSEP Table 8-3c. Infants and toddlers ages birth through 2 receiving early intervention services under IDEA, Part C, by eligibility criteria, age and state: 2005; and
- OSEP Table C-2. Estimated resident population ages birth through 2, by state: 1996, 2004, and 2005.

The actual target data were presented at a stakeholders meeting on January 12, 2007. Information about improvement activities completed and progress in meeting the target was disseminated. The State will report in late March 2007, on its website, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State, on the target in the SPP.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005	1.59%

Actual Target Data for FFY 2005: 1.61%

C. Comparison to other states with narrow eligibility requirements:

			Percentage increase in	
		Percentage of birth to 3	resident population birth to	
Rank	State	population served	3	Rank
1	Connecticut	3.16%	32%	14
2	North Dakota	3.02%	1.39%	4
3	Idaho	2.90%	2.09%	2
4	Maine	2.89%	.91%	8
5	Montana	2.21%	.46%	11
6	Oklahoma	2.03%	.50%	10
7	Utah	1.87%	04%	13
7	South Carolina	1.87%	.59%	9
8	Tennessee	1.80%	1.17%	6
9	Oregon	1.78%	.04%	12
10	District of Columbia	1.68%	3.20%	1
11	Nebraska	1.67%	1.03%	7
12	Arizona	1.61%	2.00%	3
13	Guam	1.47%	No Data	
14	Nevada	1.36%	1.99%	4
15	Georgia	1.34%	1.46%	5

D. Comparison to National Data:

	2005 % of population served	% Increase in total number of children served
National	2.34%	2.8%
Arizona	1.61%	6.1%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

Arizona's actual child count data for birth to 3 (1.61%) **exceeded its target** of 1.59% for the report year 2005-2006. While the total US population of birth to 3 has increased by .98% since 2004, and just over 7% since 1996; Arizona's population of birth to 3 has increased by 2% since 2004, and by more than 30% since 1996. Arizona continues to make improvements in the total percentage of the birth to 3 population served, despite experiencing extremely rapid population growth. Arizona has maintained reliable child count trend data since 2000; trend data show that the percentage of children served has grown faster than the percentage of state population growth every year since 2002.

Progress has been made in 13 of 15 counties between 2002 and 2005. Of the two counties experiencing a decline in child counts, one has a very small population and has experienced population declines. The other county has experienced 12% population growth since 2002 and has experienced only a .03% (<1%) decline in the percentage of children served. Rates of progress have varied across counties due to factors such as variable population growth rates.



Of the 16 states with narrow eligibility requirements, Arizona ranks 3^{rd,} behind the District of Columbia and Idaho, in terms of the percentage increase in the number of children served. With regard to percentage of the birth-to-3 population served, Arizona ranks 12th for the 2005-2006 report year.

Whereas Arizona's percentage of birth-to-3 children served (1.61%) continues to be below the national percentage (2.34%), Arizona's <u>number</u> of children served increased by 6.1%, a larger percentage than the increase in the national number of children served (2.8%).

The percentage increase in number of children served was calculated by comparing data in OSEP's Table 8-1 2004 to data in OSEP's Table 8-1 2005, Infants and toddlers ages birth through 2 receiving early intervention services under IDEA, Part C, by age and state.

National: (290753-282733)/282733= 2.8%

Arizona: (4450-4196)/4196=6.1%

Improvement Activities	Timelines	Status	
Update Public Awareness (PA) Plan			
Opuale Fublic Awareness (FA) Fidit			
Revise strategies to identify and inform families of children who: • are potentially transient (such as migrant, homeless, military, and illegal immigrants); • have premature infants or infants with other physical risk factors; • are involved with the behavioral health and/or Medicaid systems; and • are involved with the child protective system (children are wards of the State).	January 2006 and ongoing.	Completed.	
Continue PA efforts to primary referral sources.	December 2005 and ongoing.	Ongoing.	
Monitor and evaluate PA efforts and revise plan as needed.	January 2007	Ongoing.	
Develop and maintain collaborative efforts with			
agencies and organizations representing			
primary referral sources.	0	0	
Continue implementation of Child Find IGA with Arizona Department of Education (ADE).	Ongoing.	Ongoing.	
Continue to develop and implement agreements with Early Head Start, Healthy Families, and tribal early care and education programs that outline child find and public awareness responsibilities and efforts.	Ongoing.	Continuing.	
Collect, analyze and utilize public awareness			
and child find data (e.g., referral source data,			
child demographics, public awareness			
materials) to guide efforts.			
Track and analyze public awareness	December 2005 and	Completed and continuing.	
distribution data by county.	annually through 2010.		
Analyze referral data to identify patterns by county or referral source, including CAPTA, health and medical community, programs	December 2005 and ongoing.	Completed and continuing.	

serving homeless children, etc.		
Analyze 618 data to identify patterns by county.	December 2005	Completed and continuing.
Share data analysis findings with regional child find.	December 2005 and ongoing.	Completed and continuing.
Incorporated herein are the improvement activities from: • Indicator # 1 regarding the team-based model; and • Indicator # 5.		

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2006-2010: None.



Overview of the Annual Performance Report Development:

The Arizona Early Intervention Program used the following data sources for completing this indicator:

State data system.

Arizona interprets compliance with the 45-day timeline as completion of the IFSP (rather than conducting the initial IFSP meeting). Individual child evaluation and assessment and IFSP data is tracked through the state data system (ACTS) and AzEIP service providing agency tracking systems. The data is tracked and reported on a monthly basis. The data is reviewed and analyzed, and reported by contractor, program, and region on a quarterly basis. AzEIP focuses additional, more intensive monitoring and improvement efforts on those regions/contractors experiencing the most difficulty complying with the timeline.

The actual target data were presented at a stakeholders meeting on January 12, 2007, at which time improvement activities completed and progress in meeting the target were discussed. The State will report in late March 2007, on its website, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State, on the target in the SPP.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005	37%

Actual Target Data for FFY 2005: 39%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

Arizona's actual target data for FFY 2005 (39%) exceeded its target (37%).

IFSP timeline data and delay reasons:

Number of children determined eligible between 7/1/2005 and 6/30/2006: 3903

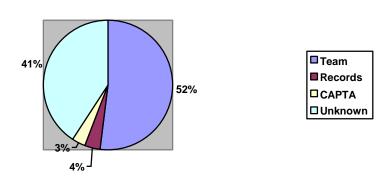
Number of eligible children with IFSP developed within 45 days of referral: 1540

Percentage of eligible children with IFSP developed within 45 days of referral: 39%

Reasons for IFSP delay must be documented in the child's case notes and reported in the data system. The child file audit tool has been revised to monitor for this documentation.

Children for whom delays were due to family circumstances were included in the numerator and denominator when calculating the percentage of timely IFSPs. 21% of all delays (622/2955) were due to family circumstance (e.g., family asking to wait until after their vacation to schedule or participate in evaluation).

Nonfamily reasons for IFSP delay



52% of non-family delays (1214/2333) were due to team issues (e.g., scheduling conflicts, delay in assigning ongoing service coordinator, delay in determining agency eligibility);

4% of non-family delays (91/2333) were due to records issues (e.g., not receiving assessment information in timely manner);

3% of non-family delays (76/2333) were due to CAPTA issues (e.g., child moved from one foster home to another):

41% of non-family delays (952/2333) were due to unknown reasons. 95% of all "unknowns" are from the period July 1 to September 30, 2005, during which the data system did not yet capture delay reason data.

During the 2005-2006 report period, IFSP delays ranged from 46 days past referral (1 day delay) to more than one hundred days past referral. The contractors with the lowest level of compliance also tended to be the contractors with the highest percentage of long delays. In one case, a contractor completed only 4% of all IFSPs in a timely manner, and completed 52% of IFSPs in more than 100 days past referral. This contractor was provided with TA during the report period without resulting progress. In July 2006, DES/AzEIP implemented intervention efforts that included targeted site visits and monthly data review and feedback; these efforts did not result in sufficient progress. More intensive intervention efforts were

implemented in September 2006, including more frequent data submissions and review, and weekly phone conferences to review open referrals. In October 2006, DES/AzEIP requested that the State Procurement Office demand a letter of assurance from the contractor that it intended to meet the terms of its contract. These intensive intervention efforts have led to progress, with 29% of July-September IFSPs completed within 45 days; the progress is more significant for children referred to this contractor after July 1, 2006- 44% of the eligible children referred after July 1 had IFSPs completed within 45 days of referral. In addition, this contractor's percentage of extremely delayed IFSPs (>100 days past referral) dropped from 52% for the 2005-2006 report period to 47% for July-September, and to 4% for children referred after July 1, 2006. Intervention efforts continue with this contractor.

When data from all contractors is accounted for, the extent of IFSP delay breaks down as follows:

Days from referral to IFSP	<46 days	46-60 days	61-71 days	72-99 days	> 99 days	IFSP not completed during report period
FFY 2005-2006	39%	14%	11%	19%	16%	1%
FFY 2006-2007	44%	14%	11%	15%	8%	8%
Quarter 1						

Evaluation/eligibility timeline data and delay reasons:

Number of children determined eligible between 7/1/2005 - 6/30/2006: 3903

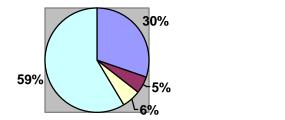
Number of children determined eligible within 45 days of referral: 3171

Percentage of children determined eligible within 45 days of referral: 81%

Reasons for evaluation/eligibility delay must be documented separately in the child's case notes and reported in the data system. The child file audit tool has been revised to monitor for this documentation.

Children for whom delays were due to family circumstances were included in the numerator and denominator when calculating the percentage of timely evaluations. 24% of all evaluation/eligibility delays (234/963) were due to family circumstance (e.g., family asking to wait until after their vacation to schedule or participate in evaluation).

Nonfamily reasons for evaluation delay





30% of non-family delays (220/729) were due to team issues (e.g. scheduling conflicts, lack of evaluator).

5% of delays (39/729) were due to records issues (e.g., not receiving evaluation results or diagnosis information.

6% of delays (42/729) were due to CAPTA issues (e.g., child moved from one foster home to another).

59% of delays (428/729) were due to unknown reasons. 95% of all "unknowns" are from the period July 1, 2005 to September 30, 2005 during which the data system did not yet capture delay reason data.

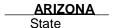
When data from all contractors is accounted for the extent of evaluation delay breaks down as follows:

Days from referral to evaluation	<46 days	46-60 days	61-71 days	72-99 days	> 99 days	Evaluation not completed during report period
FFY 2005-2006	81%	8%	3%	4%	3%	1%
FFY 2006-2007 Quarter 1	86%	7%	2%	3%	2%	0%

Results of improvement activities:

In July-August 2005, AzEIP modified its data tracking system, ACTS, to gather reasons for delay in eligibility (evaluation) and IFSP timelines. For children referred after 9/1/2005, reasons for timeline delays for both eligibility determination and initial IFSP development (i.e., >45 days) are required data elements in the data system.

During the first quarter after this modification was made, September-December 2005, the data collected and submitted was incomplete, and was difficult to extract and analyze from the database. Between January - March 2006, DES/AzEIP made significant efforts to improve data entry by the contractors, and made modifications to one of the ACTS



management reports to include delay reason data for individual children. The modified report is used to calculate the timelines.

The method that AzEIP is using, counts all children found eligible during the reporting period in the denominator (n) for both eligibility and IFSP timeline calculations. As a result, the total percentage of children in the IFSP column is less than 100% because not all children found eligible during the report period also have an IFSP developed during the report period.

When reasons for delay are taken into account, the data shows significant improvement in timelines for both eligibility (evaluation) and IFSP. The greatest impact of delay reason data was on IFSP timeline rates. Timeline data, including delay reasons, was calculated for each individual contractor. Contractors are ranked by level of compliance, and targeted TA and monitoring are implemented for lowest performers.

Statewide contractor meetings included presentation of timeline data and discussion of strategies that were working well for contractors with high compliance levels. Focused onsite TA was conducted by the CQI Coordinators and Technical Assistance and Monitoring Specialists (TAMS) for contractors with low compliance levels to review their process and procedures, and to identify strategies for improvement. In addition, a regional (Maricopa County) meeting was held with the initial planning process contractors and ongoing service coordination contractors to discuss improvement strategies; this meeting was held with support from the Mountain Plains Regional Resource Center.

Improvement Activities	Timelines	Status
Revise and expand policies and procedures related to 45-day timeline.		
Clarify "initial IFSP meeting" for purposes of 45-day timeline.	February 2006	Completed. DES/AzEIP determined that the "initial IFSP meeting" is the completion of the initial IFSP.
Align policies and procedures across all agencies and providers regarding 45-day timeline.	February 2006	Revised Strategy. See description in Indicator 1 and Revisions with justification below.
Disseminate and implement revised policies and procedures related to 45-day timeline across the service providing agencies.	February 2006 and ongoing.	Revised Strategy. See description in Indicator 1 and Revisions with justification below.
Monitor through continuous monitoring and quality improvement system (see Indicator #9) to ensure implementation of policies and procedures.	March 2006 and ongoing.	Completed and ongoing.
Update IFSP form and related procedures, as needed, to align with SPP indicators.		
Revise IFSP to: clarify initial IFSP meeting vs. completed IFSP; clarify "Start Date" as "Planned Start Date;" document dissemination of family survey annually; and incorporate SPP Child Outcomes.	January 2006 – March 2006.	IFSP was revised to clarify and document "planned start date" and "actual start date." After exploration, the State decided not to (1) clarify initial vs. completed IFSP or (2) incorporate

Disseminate revised IFSP form with guidance.	March 2006	Child outcomes Ratings into the IFSP. See below Revisions with Justification. Revisions to IFSP
	Walch 2000	completed Fall 2006 to become effective January 1, 2007.
Update and Expand Technical Assistance and Training System.		
Support and expand TA & Monitoring Specialists statewide.	January 2006 and ongoing.	Completed.
Establish TA Cadre to support providers in areas of focused priorities.	January 2006 and ongoing.	Completed.
Continue implementation of and identify additional methods of providing technical assistance.	December 2005 and ongoing.	Completed.
Provide technical assistance and/or training to programs regarding: • revisions to IFSP form, including determining and documenting the Planned Start Date in the IFSP • accessing and documenting timely services • team-based service delivery model • implementation of the NCSEAM survey for families • service coordination documentation for required activities	March 2006 and ongoing	Completed.
Undertake focused monitoring, as appropriate, and implement corrective action/program improvement plans to improve 45-day timeline.	January 2006 and ongoing.	Completed. See Indicator 9 for full status.
Incorporated herein are the Improvement Activities from: • Indicator #1 concerning (i) evaluating system capacity issues; (ii) identifying and implementing a recruitment and retention plan, and (iii) implementing and maintaining of a team-based model. • Indicator # 9 regarding the CQIMS. • Indicator #14 regarding revising data system to incorporate required data elements.	December 2005 and ongoing.	

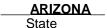
Revisions, with Justification, to Proposed Targets/ Improvement Activities/ Timelines/ Resources for FFY 2006

Data analysis and feedback, and TA provided to contractors during FFY 2005 led to some improvements in 45-day timeline compliance, but not sufficient to ensure statewide compliance before the end of Arizona's compliance agreement in FFY 2007. Compliance varied widely across contractors at the end of the reporting period, with several contractors approaching 100% compliance while 2 others were below 30% compliance. AzEIP determined that additional improvement activities would be necessary in order to ensure improvement resulting in compliance.

Improvement Activities	Timelines	Resources
Original: Revise and expand policies and procedures related to 45-day timeline Align policies and procedures across all	February 2006	CQI Coordinators, CSPD
agencies and providers regarding 45-day timeline.		Coordinator, Executive Director, State Interagency Team and TA and
Disseminate and implement revised policies and procedures related to 45-day timeline across the service providing agencies.	February 2006	Monitoring Specialists.
Replace With: Provide technical assistance to agencies on the 45-day timeline, including policy and procedures, through monitoring activities; Quarterly Regional meetings, and focused technical assistance.	October 2006 and ongoing.	CQI Coordinators, CSPD Coordinator, TA Specialist and TAMS.
Justification for Request for Replacement: DES/AzEIP seeks to continue its direct technical assistance and training through on-site monitoring, focused TA, and regional meetings, in order to ensure that professionals understand the policies and procedures for ensuring timely provision of services, and have the tools to implement them.		
Original: Update IFSP form and related procedures, as needed, to align with SPP indicators Revise IFSP to: • clarify initial IFSP meeting vs. completed IFSP. • incorporate SPP Child Outcomes.	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, and TAMS.
Justification for deletion of these activities: Upon deliberation, the Child Outcomes ratings were not incorporated into the IFSP form and the State's definition of what constitutes an initial IFSP meeting was not changed.		
Focus on improving timeliness, reliability, and validity of IPP data from all contractors.		
Provide detailed feedback and guidance on automated data to each contractor on a monthly basis. New activity	August 2006 – June 2007	Technical Assistance Specialist, CQI Coordinators, and TA and Monitoring Specialists.
Provide detailed feedback and guidance on automated data to each contractor as needed, but at least quarterly. New activity	July 2006 and ongoing.	Technical Assistance Specialist, CQI Coordinators, and TA and Monitoring Specialists.



Provide targeted TA for Maricopa County	April 2006 – December	Technical Assistance
contractors implementing the IPP and service	2007 and ongoing as	Specialist, CQI
coordination agencies, focusing on improving coordination across programs during IPP process	needed.	Coordinators, and TA and Monitoring Specialists.
to improve IFSP timeline compliance. New activity		Worldoning Opeolations.



Overview of the Annual Performance Report Development:

The data used to measure this indicator is taken from spring 2006 site visits of programs that are part of Cycle 3 (of the five-year site visit cycle). These programs are located primarily in Northern Arizona (Coconino, Apache and Navajo Counties and the Navajo Nation). In each site visit a minimum of two files per service coordinator were reviewed using the child file audit tool, which provided the data for this indicator.

The actual target data were presented at a stakeholders meeting on January 12, 2007, at which time improvement activities completed and progress in meeting the target were discussed. The State will report in late March 2007, on its website, progress or slippage made in meeting the measurable and rigorous target found in the SPP, and the performance of each early intervention program located in the State on the target in the SPP.

Monitoring Priority: Effective General Supervision Part C/Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

A. 80% of children exiting Part C who have an IFSP with transition steps and services

70 of 87 files were compliant, as disaggregated by county below:

91% Coconino County (41/45 files)

87% Apache and Navajo County (13/15 files)

59% Navajo Nation (16/27 files)

B. 89% of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred

16 of 18 files were compliant, as disaggregated by county below:

91% Coconino County (10/11 files)

100% Apache and Navajo County (4/4 files)

67% Navajo Nation (2/3 files)

C. 57% children exiting Part C and potentially eligible for Part B where the transition conference occurred

11 of 19 files were compliant, as disaggregated below:

60% Coconino County (6/10 files)

100% Apache and Navajo County (4/4 files)

20% Navajo Nation (1/5 files)

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

A. DES/AzEIP improved its baseline data on this measure from last year's 54% to 80% this year. Data gathered for this item was based on site visit reviews of specific steps within the transition process, documented appropriately by the service coordinator upon completion of the step. Lack of documentation on the IFSP that the service coordinator had completed the transition steps, contributed to the failure to reach 100% compliance on this indicator. For those programs with this item in their corrective action plan, program progress is measured through the quarterly submission of child file audits. Files are found in compliance if all steps are completed appropriately, relative to the child's age. If any item within the checklist is determined non-compliant, the child's file is found non-compliant.

Subsequent to the site reviews, DES/AzEIP and the Arizona Department of Education (ADE) developed a comprehensive training curriculum on the Transition Intergovernmental Agreement (IGA) that outlines the steps and services that occur during a transition, and the roles and responsibilities of AzEIP and Public Education Agency (PEA) representatives. The training was held in Apache and Navajo Counties as well as on the Navajo Nation in the fall of 2006. Technical assistance regarding the transition process is also provided to service providing agencies under a corrective action plan by the CQI Coordinator and the regional TAMS.

B. DES/AzEIP is at 89% compliance for this indicator as compared to its baseline of 97% last year. The slippage can be attributed to a more accurate measurement utilized this year, with a revised monitoring tool to determine the percentage of programs that invited school districts to the transition conference and a standardized invitation form provided with the Transition IGA.

Apache and Navajo Counties met compliance, while Coconino County and the Navajo Nation did not. Monitors learned that not all service coordinators were aware of the invitation form and the requirement to ensure that the invitation to the schools was documented. DES/AzEIP and ADE, as described in A, above, have undertaken joint trainings around the State, nine of which took place in 2006, with an estimated nine more to take place in 2007. Specifically, DES/AzEIP and ADE provided three training opportunities on the Navajo Nation to address transition issues in May, June, and August of 2006. Navajo and Apache Counties were provided a full day of training in November 2006, with plans for training in Coconino County in the fall of 2007.

C. DES/AzEIP improved its baseline data for this indicator to 57%, from 47% last year. Data gathered at the time of the site visits was based on the transition conference occurring within the 2.6 to 2.9 timeframe, or earlier for schools accepting children earlier according to the terms of the Transition IGA with ADE. The Navajo Nation's low percentage was the result of a lack of understanding of the roles and responsibilities of service coordinators and school districts, to ensure that children receive a free and appropriate education by three years of age. This precipitated the three joint trainings on transition held on the Nation in 2006.

Another contributing factor to the 57% is the fact that DES/AzEIP did not gather reason data when transition conferences did not occur within the 2.6-2.9 timeframe, such as documented family or other exceptional circumstances. It also did not note if and when the transition conference happened and the date it was held, for those transitions that happened after age 2.9, or in those instances when the child was referred to early intervention late (e.g., after 2.6). DES/AzEIP is in the process of revising its child file audit tools to capture these factors.

Improvement Activities	Timelines	Status
Update IFSP form and related procedures, as needed, to align with SPP indicators. Revise IFSP and IFSP Guidance document to delineate transition steps and services.	March - May 2006	Completed fall 2006 to become effective January 1, 2007. Please see Indicator 1 regarding revision to the IFSP and IFSP Guidance.
Disseminate revised IFSP form with Guidance document.	July 2006	Completed fall 2006 to become effective January

		1, 2007. Please see Indicator 1 regarding distribution on the revised IFSP.
Provide technical assistance related to required documentation of transition information on the IFSP and related documents.	July - September 2006	Completed. Please see A, above, and Indicator 1 regarding training on the revised IFSP.
Revise, if needed, the Transition IGA to align with IDEA 2004, when regulations are available.	December 2007	Activity is not within the reporting period. Regulations are not yet available.
Continue annual cross-training on the Transition IGA in collaboration with ADE.	November 2006 and annually through 2010.	Completed. Please see discussion in A, above, regarding cross training on the Transition IGA.
Revise data systems to capture required transition data elements and to identify areas of non-compliance.	July 2006	See below for requested revisions.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005 [If applicable]

Improvement Activities	Timelines	Resources
Prepare and disseminate written technical assistance (such as a Technical Assistance Bulletin) on transition policy and procedures. New activity identified by stakeholders during APR development process.	October 2007	TAMS, CQI Coordinators and CSPD Coordinator.
Revise monitoring tools to collect: - reason data when transition conference not held as required date when conference held. New activity identified by stakeholders during APR development process.	February – March 2007	TAMS and CQI Coordinators.
Provide technical assistance to assist local communities in preparing procedures to ensure smooth transition and to resolve challenges. New activity identified by stakeholders during APR development process.	September 2007 and ongoing.	TAMS, CQI Coordinators and CSPD Coordinator.
Focused technical assistance requiring programs to drill down issues when non-compliance identified. New activity identified by stakeholders during APR development process.	June 2007	CQI Coordinators and TAMS.
Original: Revise data systems to capture required transition data elements and to identify areas of noncompliance.	July 2006	TA Specialist and Management Information Coordinator.

ARIZONA	
State	

Overview of the Annual Performance Report Development:

The general supervision data were collected through the following components of the State's general supervision system:

Monitoring Data

- Site Review Cycles 1 and 2 between July 2004-June 2005
- Program Self-Assessment- Cycles 3, 4, and 5 between October 2004-December 2004

Desk Audits

State Data System

Complaint Logs

Site reviews occur on a 5 year monitoring cycle which was developed based on population and risk factors. Maricopa County, which makes up 60% of the population in the State and had known system concerns and compliance issues, was chosen for Cycle 1. Cycles 2, 3, 4, and 5 were chosen by risk factors, and then grouped geographically. Although each cycle receives a site visit every five years, DES/AzEIP may conduct a site review outside of the cycle when serious issues of non-compliance are identified through complaints, desk audits, Program Self-Assessment (PSA), and/or if issues of non-compliance are not corrected in a timely manner.

The actual target data were presented at a stakeholders meeting on January 12, 2007. Information about improvement activities completed and progress in meeting the target was disseminated.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2005	25%

Actual Target Data for FFY 2005:

Baseline Data for FFY 2005:

46% of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance identified 2004-2005 =434.
- b. # of corrections completed as soon as possible, but in no case later than one year from identification 2005-2006 = 201.

Percent = [201 divided by 434] times 100 = 46%.

The baseline data for this indicator is based on data collected during 2005-2006 from

- Cycle 1 and Cycle 2 Site Reviews.
- Cycle 3, 4, and 5 Program Self-Assessment.
- State Complaint Log.
- State's Data System.

Taken together, these data sources represent 31/31 service coordination programs in the State. The correction data was submitted by each program in accordance with their Corrective Action Plan. For many of the findings of non-compliance, this required two Child File Audits per service coordinator, with the resulting data submitted to DES/AzEIP for review. If the data submitted through the child file audits was inconsistent with data from the State's data system or complaints received by AzEIP, the AzEIP Continuous Quality Improvement Coordinator (CQI) and the Technical Assistance and Monitoring Specialist (TAMS) visited the program to review additional files, provide TA, and to identify new activities for improvement, if needed.

Table A is a breakdown of the data by the Monitoring Priority Areas (SPP Indicators 1, 7, 8,) and then by Monitoring Non-Priority Areas, which include the additional federal requirements. Arizona has clustered the non-priority areas by Child Find, IFSP required components, Service Coordination, and Procedural Safeguards.

Table A			
31 programs	# of Identified Non- compliance	# Corrected	% Corrected < 1 year
Monitoring Priority Areas: • 45-days • Timely Services • Transition	58	19	33%
			Not Corrected: 45-day: 11/11 programs Timely Services: 15/29 programs Transition: 13/29 programs See analysis below
Monitoring Non-priority Areas Child Find IFSP Service Coordination Procedural Safeguards	406	195	48%
Complaints	N/A	N/A	N/A
Total	464	214	46%

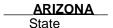
Analysis of Table 1:

Monitoring Priority Areas

The data indicates the success the State has experienced in its ability to identify and correct noncompliance. It also reflects the challenge the State has in meeting the 45-day timeline, timely provision of services, and to some extent ensuring each child received timely transition planning. A thorough discussion of the State's improvement activities and strategies related to the monitoring priority areas can be found in Indicators 1, 7, and 8.

Monitoring Non-Priority Areas

A drill down of the outstanding non-compliance of the monitoring non-priority areas by program, county, and statewide revealed that most programs had made improvements in ensuring evaluations were completed by a multi-disciplinary team, documenting service coordination activities, and providing procedural safeguards at the appropriate times. However, statewide programs continue to be noncompliant in Child Find related to evaluations not including all areas of development; most specifically vision and hearing. While many programs made significant correction to include the required components of the IFSP, ensuring that the child's present levels of development included all areas of development; specifically vision and hearing, writing functional outcomes and ensuring the frequency, intensity, start and end of each service were included the IFSP, seemed to be systemic statewide issues.



Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

The <u>2005-2006</u> data is baseline data reflecting correction of identified noncompliance as soon as possible, but in no case later than one year. The actual target data of 46% exceeds the Measurable and Rigorous Target of 25% Arizona set for 2005.

Isolating the Cycle 2 correction data (Table B) illustrates an increase from 46% to 85% in the State's ability to identify and correct noncompliance as soon as possible but not later than one year. The programs in Cycle 2 were not monitored until the late spring and early summer of 2005, so the correction data submitted by the programs as of June 2006 shows a sizeable increase in the percentage of correction within one year, when compared to the percentage of correction in the baseline data that includes all 5 Cycles. Revisions to the monitoring process, tools and procedures after Cycle 1 site reviews, as well as the addition of the Technical Assistance and Monitoring Specialists, contributed to the increase in correction within one year for Cycle 2.

Table B					
Cycle 2 Correction Data S	Cycle 2 Correction Data Submitted as of 6/06				
8 programs	Identified Non- Compliance	Correction >1 year	% Corrected		
Priority 45-days Timely Services Transition	12	9	75%		
Non-priority	53	47	89%		
Total	65	56	86%		

2004-2005 was the first year AzEIP implemented its interagency, multifaceted Continuous Quality Monitoring and Improvement System. The one-year correction data was 46%, which represents significant improvement in AzEIP's ability to identify and correct noncompliance. However, AzEIP determined additional strategies, such as Corrective Measures and Remedies and intensive technical assistance, were needed to correct the areas of non-compliance that remained outstanding beyond one year of identification. In addition, these strategies would then be implemented with future monitoring cycles to ensure that correction occurs within one year of the identified noncompliance.

In February 2006, AzEIP began implementing its Corrective Measures and Remedies in accordance with the "Five State Agency" IGA, which was revised and implemented this fiscal year. For programs that did not correct identified non-compliance within one year, the program was provided technical assistance related to the outstanding areas of non-compliance and was then required to submit progress updates every three months, rather than the standard six months. Additionally, in the fall of 2006, the DES Procurement Office, at the request of

DES/AzEIP, issued Demands for Assurances to two programs with persistent and significant non-compliance.

Many of the programs received intensive follow-up technical assistance visits by the TAMS in their regions focusing on their program's specific areas of noncompliance. A summary of the TA efforts is included in Table C.

Table C Tech	Table C Technical Assistance Provided by Technical Assistance and Monitoring Specialists (TAMS)				
	Number of T/A Contacts by Cluster Area				
	(on-site	, phone conference	, email)		
Cycle	General Supervision (Procedural (Evaluation and Safeguards, Policy and Procedures, monitoring and CAPS) Child Find (Evaluation and (IFSP required components, service coordination, and timely provision of services)			Transition	
Cycle 1	18	11	9	0	
Cycle 2	7	9	14	7	
Cycle 3	10	11	11	9	
Cycle 4	8	9	6	5	
Cycle 5	6	8	8	5	
Total	49	48	48	26	

As the TAMS visited each of the programs, it became apparent that the system for disseminating information regarding revised policies and procedures, new forms and updates issued by DES/AzEIP was breaking down at the supervisor level. Many of the service coordinators in the field commented that they had never heard or seen much of the information shared with them by the TAMS. Therefore, much of the technical assistance and support was focused on direct instruction to the service coordinators regarding forms and procedures, to ensure a thorough understanding of their roles and responsibilities. AzEIP CQI Coordinators and the TAMS provided instruction to supervisors and other administrators, regarding the necessity of sharing communications to ensure that staff have the most up-to-date and accurate information.

Table D illustrates the results of implementing the additional strategies in the last quarter of FFY 2005. The correction data submitted by the programs in June 2006 shows correction data went from 46% to 85% over an additional three month period for Cycles 1, 2, 4, and 5. Cycle 3 data was not included in this calculation, as Cycle 3's site review visits began in February 2006, and Cycle 3 programs were not required to submit any further progress data beyond December 2005.

Table D					
Cycle 1 and 2 Site reviews; Cycle 4, 5 PSA	2004-2005		2005-2006		
24 programs	# of Identified Non- compliance	# Corrected	% Corrected < 1 year	Correction ≥ 2 years	% Corrected
Priority	36	11	31%	28	78%
Non-priority	166	96	58%	143	86%
Other	N/A	N/A	N/A	N/A	N/A
Total	202	107	53%	171	85%

In October 2006, AzEIP implemented Regional Quarterly meetings designed to provide training and technical assistance on AzEIP policies, procedures and best practice to early intervention professionals employed or contracted by DES/AzEIP, DES/ Division of Developmental Disabilities (DES/DDD), Arizona State Schools for the Deaf and the Blind (ASDB), and/or the Arizona Department of Health Services/Office of Children with Special Health Care Needs (ADHS/OCSHCN). DES/AzEIP staff and the Technical Assistance and Monitoring Specialists (TAMS) conducted nine Regional Quarterly meetings throughout the State during the fourth quarter of 2006. Approximately 350 service coordinators, providers, and other early childhood members participated statewide. At each meeting, the policies and procedures, first disseminated in July 2006, were again disseminated and discussed by DES/AzEIP Staff and the TAMS.

In fall of 2006, AzEIP began conducting verification visits prior to issuing a "Close Out" letter to programs that reported correction of all areas of non-compliance. One program in Cycle 1 was issued a close out letter in July 2006, without a verification visit; however, AzEIP was able to verify that the correction data submitted was aligned with the data reviewed through desk audits of the agency's data, and review of the Complaint Log.

The guidance issued by OSEP during the Accountability Conference regarding 1) what States should consider to be able to determine when non-compliance is corrected, and 2) how the one-year timeline for correction is measured, has resulted in the need to revise the State's monitoring procedures. The procedures will be revised to include verification visits to "Close Out" program non-compliance. In addition, revisions must include the State's definition of the one-year timeline for correction. AzEIP will consider non-compliance corrected within the one-year timeline when the State's notification to a program or agency, in writing, of its correction of noncompliance is sent to the program within one year of the State's original written notification, of the program's non-compliance.

Verification Visits and Close Out Letters issued as of December 2006

Cycle 1 1/7 programs

Cycle 2 4/9 programs

Cycle 3 1/6 program in less than one year of identification of noncompliance

Cycle 4 0/5 programs Cycle 5 2/3 programs

Given the number of programs that continue to have outstanding areas of non-compliance beyond one year, and Arizona's need to focus on correcting non-compliance related to the 45-day timeline and timely provision of services, AzEIP requested that the programs not submit an annual Program Self Assessment (PSA). Instead, the programs were asked to focus their energies on closing out their current Corrective Action Plans (CAP) that exceed the one-year timeline, and identifying strategies and activities to improve their ability to meet the 45-day timelines and ensure families the provision of timely services. In addition, AzEIP programs will be asked to provide waiting list data (see Indicator 1) to drill down reasons for non-compliance of timely provision of services. AzEIP will continue to implement the progression of Corrective Measures and Remedies with programs that fail to improve and correct identified non-compliance. The Measures may include partial or full withholding of payments and /or termination of contracts.

AzEIP will be revising the procedures and tools in the Continuous Quality Improvement and Monitoring System to align the requirements with the SPP Indicators and related requirements, in an effort to gather the necessary data for the Indicators, and to focus the State's resources on meeting our Compliance Agreement by December 2007, particularly in the areas of the 45-day timeline and timely provision of services.

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Status
Revise, disseminate, and implement the Interagency Agreements with the AzEIP participating agencies to address General Supervision requirements.	April 30, 2006	Completed. Representatives of DES/AzEIP, DES/DDD, AHCCCS, ASDB, ADHS/OCSHCN and ADE drafted an Intergovernmental Agreement (IGA) describing the roles and responsibilities, including Lead Agency and General Supervision requirements, for each of the five AzEIP participating agencies. The IGA, known as the Five State Agency IGA, was published for public comment from April 29, 2005 through June 28, 2005. Changes were made and the document was redistributed to all agencies. The IGA has been signed by representatives of each of the five state agencies and their attorneys and filed with the Arizona Secretary of State. Copies of the final, signed IGA were disseminated to each of the agency partners, who in turn will educate appropriate agency staff on the provisions of the IGA.
Implement the monitoring system in accordance with the Cycles.		
Implement Program Self-Assessment with Service Coordination providers statewide.	In accordance with established monitoring cycles.	Completed.
Implement the "desk audit" process: analyze available data from all sources, including comparisons over time, and utilize analysis to identify issues of compliance and non compliance.	In accordance with established monitoring cycles.	Completed and ongoing. See Indicator 7 for Desk Audit activities related to 45-day timeline.
Implement the site review process with Service Coordination providers statewide.	In accordance with established monitoring cycles.	Completed on target and ongoing. Cycle 1 - Fall 2004 Site Reviews. Cycle 2 - Spring 2005 Site Reviews. Cycle 3 - Spring 2006 Site Reviews.
Review and approve corrective action plans.	In accordance with established monitoring cycles.	Completed and ongoing.

Monitor progress on corrective action plans.	In accordance with established monitoring cycles.	Completed and ongoing.
Review and approve "completion and close-out" of corrective action plans.	February 2006 and ongoing.	Completed and ongoing. See discussion above.
Implement intensified corrective action plan with specific technical assistance for non-compliance items not resolved within one year.	February 2006 and ongoing, as needed.	Completed and ongoing. See discussion above.
Implement appropriate sanctions or enforcement activities for failure to complete corrective action items.	February 2007 and ongoing.	Revised Monitoring Policies and Procedures, which include appropriate corrective measures and remedies for failure to complete corrective action items. Implemented corrective measures in 2005-2006, including increased reporting and focused site review visits and Demand for Assurances to correct non-compliance.
Explore incentives for programs with close-outs in 9 months or less.	February 2007	Not within reporting period.
Review and revise polices, procedures, and/or tools of the CQIMS to ensure alignment with new Federal and/or State policies and procedures and SPP requirements.	March 2006 & ongoing annually, 9/30/06 and 9/30/07.	Completed and ongoing. 9/30/06 - Revised Monitoring Procedures to include the method the State will use to consider correction of non-compliance and a description of how the one-year timeline will be measured. See Revisions with Justification below.
Realign monitoring cycle with regions established under the AzEIP system redesign.	January 2007	Activity is not within the reporting period. Timeline revision requested to align with delays in Redesign timelines. See Revisions with Justification below.
Implement the NCSEAM family survey and incorporate into the CMQIS.		
Analyze family survey results, compare to baseline data, and review trends. Utilize results to inform monitoring and corrective action.	December 2006 & annually through 2010.	See Revisions with Justification below.
Provide findings from family surveys to AzEIP service providing agencies that are responsible for sharing with appropriate providers/contractors.	December 2006 & annually through 2010.	See Revisions with Justification below.
Update IFSP form to document dissemination of family survey annually.	January 2006 - March 2006	Completed. See Indicator 1.
Incorporated herein are the improvement activities from Indicator 14 regarding management information systems.		See Indicator 14.

Incorporated herein are the improvement activities from Indicator 1 regarding implementation of the team-based service delivery model.	See Indicator 1.
Incorporated herein are the improvement activities from Indicator 7 regarding revision to the IFSP form and policies.	See Indicator 7.
Incorporated herein are the improvement activities from Indicators 1, 7, and 8 regarding the establishment or revision of policies and procedures.	See Revision with justification.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for (Insert FFY)
[If applicable]

Implement the NCSEAM family survey and incorporate into the CQIMS	Timelines	Resources
Analyze family survey results, compare to baseline data, and review trends. Utilize results to inform monitoring and corrective action.	July 2007 and annually thereafter until 2010.	CSPD Coordinator, CQI Coordinator and TAMS.
Justification for Revision to Timeline. Due to the delay in implementation of the NCSEAM survey, results were not available to review in December 2006. Request to change timeline to July 2007 and annually thereafter until 2010.		
Provide findings from family surveys to AzEIP service providing agencies that are responsible for sharing with appropriate providers/contractors.	July 2007 and annually thereafter until 2010.	CSPD Coordinator, CQI Coordinator and TAMS.
Justification for Revision to Timeline. Due to the delay in implementation of the NCSEAM survey, results were not available to review in December 2006. Request to change timeline to July 2007 and annually thereafter until 2010.		
Realign monitoring cycles with regions established under the AzEIP system redesign. Justification for Requested Revision to	January 2008	DES/AzEIP Staff.

Timelines: Implementation of the AzEIP Redesign has been delayed for an unknown period of time, while essential infrastructure, such as automated systems, foundational training, and technical assistance is established. As such, a change in the timeline for this activity is needed. Review and revise polices, procedures, and/or tools of the CQIMS to ensure alignment with new Federal and/or State policies and procedures and SPP requirements.	March 2006 & ongoing annually	CQI Coordinators, TA Specialist
Justification for Revision to Timeline. DES/AzEIP intends to review and revise policies on an ongoing basis.		
Incorporated herein are the improvement activities from Indicators 1, 7, and 8 regarding the establishment or revision of policies and procedures.		
Justification for elimination: The activities regarding the establishment or revision of policies and procedures in Indicators 1, 7, and 8 were removed and replaced with one activity about technical assistance.		

Overview of the Annual Performance Report Development:

The data used for this Indicator is from the formal Complaint Log.

The actual target data was presented and disseminated, respectively, at a stakeholders meeting and to the ICC on January 12, 2007.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c))] divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

100%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

All complaints submitted in writing to DES/AzEIP, by families, individuals or organizations are recorded in a formal Complaint log. DES/AzEIP utilizes the log for tracking and documenting activities, timelines, and findings for each written complaint.

DES/AzEIP received one formal written complaint, which was investigated and a report issued, with findings, within the 60-day timeframe.

Improvement Activities	Timelines	Status
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings.	Completed 2005-2006 and on-going. See Revisions with Justification.
Conduct semi-annual reviews of the complaint logs to assist in identifying and resolving systemic	December 2005 and every six months	Completed for 2005-2006. CQI Coordinators reviewed

issues.	through 2010.	both formal and informal complaint logs for trends, themes specific to a particular County and/or program.
Implement a reminder system to alert the complaint investigator a week prior to a complaint due date that the 60- day timeline is about to expire.	January 2006	Completed.
Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if needed, revising the polices, procedures, and/or tools of the CMQIS to ensure alignment with new Federal and/or State policies and procedures		

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005

Improvement Activities	Timelines	Resources
Original	December 2005 with	
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	annual trainings and ongoing test options.	
Revision Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings.	
Justification The AzEIP Standards of Practice allows a professional to test-out of certain modules. DES/AzEIP does not allow testing out of the module, Policies and Professionalism, which includes the discussion of procedural safeguards. This was mistakenly included in the SPP and is therefore being removed.		

Overview of the Annual Performance Report Development:

The data used for this Indicator is from the formal Complaint Log.

The actual target data was presented and disseminated, respectively, at a stakeholder's meeting and to the ICC on January 12, 2007.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b))] divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

Not Applicable because the two requests for Due Process Hearings were withdrawn and therefore, were not fully adjudicated.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

DES/AzEIP received two Due Process Hearing Requests. Both requests were resolved through informal negotiations and withdrawn within the 30 day time frame.

Improvement Activities	Timelines	Status
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings and ongoing test options.	Completed 2005-2006 and ongoing. See Revisions with Justification.
Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if		

needed, revising the policies, procedures, and/or	
tools of the Continuous Monitoring and Quality	
Improvement System to ensure alignment with new	
Federal and/or State policies and procedures.	

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005

Improvement Activities	Timelines	Resources
Original Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings and ongoing test options.	CSPD Coordinator, NAU/IHD ASPTD, CQI Coordinator, TAMS.
Revision Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with annual trainings.	
Justification The AzEIP Standards of Practice allows a professional to test-out of certain modules. DES/AzEIP does not allow testing out of the module, Policies and Professionalism, which includes the discussion of procedural safeguards. This was mistakenly included in the SPP and is therefore being removed.		

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

NOT APPLICABLE

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement: Percent = [(2.1(a) (i) + 2.1(b) (i))] divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2005	N/A

Actual Target Data for FFY 2005:

N/A

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

AzEIP Procedural Safeguards Policies and Procedures were revised to ensure mediation is available to resolve any dispute regardless of whether or not a due process request was filed. Service Coordinators explain this to parents when describing what to do when they have a disagreement/concern, or when explaining other family rights. This description is also included in the AzEIP Procedural Safeguards for Families booklet.

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2005

In 2004-2005, AzEIP received one mediation request; and in 2005-2006, DES/AzEIP did not receive any mediation requests. OSEP guidance on developing the SPP indicated that targets and improvement activities were not needed until the number of mediations requested totaled ten or greater. AzEIP included both targets and improvement activities in the 2005-2010 SPP submitted last year. As a result, AzEIP is removing the proposed targets and improvement activities from the 2005 SPP. If, in future reporting periods, the number of mediation requests reaches ten or greater, AzEIP will develop targets and improvement activities and report them in the corresponding APR.

Overview of the Annual Performance Report Development:

The Arizona Early Intervention Program used the following data sources for completing this indicator:

- OSEP data submission guidelines;
- State data system;
- Desk audits;
- Program self-assessments; and
- Monitoring data-site visits.

In addition, Arizona reviewed OSEP's Data Accuracy: Critical elements for Review of SPPs draft document, and the information presented during the Data Meeting in May 2006 and the National Accountability Conference in September 2006.

The actual target data were presented at a stakeholders meeting on January 12, 2007. Information about improvement activities completed and progress in meeting the target was disseminated.

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a) (3) (B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings, and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for 2005:

- a. 100%.
- b. Mechanisms for ensuring error free, consistent, valid and reliable data
 - ❖ DES/AzEIP defines the data requirements, definitions, and values used in the state data system. Requirements, definitions and values are consistent with OSEP guidance.
 - After receipt of data by DES/AzEIP, child records are combined, unduplicated, and run through a variety of programs to clean data, and perform edit checks and validations.

- DES/AzEIP utilizes collected data to produce a variety of management reports. These reports are reviewed and analyzed to assess data collection procedures and practices and to determine whether data was accurate and timely. Technical assistance, including provision of error reports, is provided to agencies and contractors as needed.
- Site monitoring of early intervention service providing agencies includes comparing data recorded in a child's paper file with data recorded in the electronic record, and verifies data submitted in an agency's self-assessment report.
- Verification visits conducted by CQI Coordinators and TAMS prior to closing out an agency's Corrective Action Plan to verify the data submitted in the agency's progress report. Verification includes comparing paper files with electronic files and progress reports.
- Throughout the reporting period, the DES/AzEIP data manager and technical assistance specialist hold meetings with the data managers from the AzEIP service providing agencies to discuss the data requirements. These discussions include review and definition of data elements required, and review of data gathered on a monthly basis.
- Crosswalks are utilized, where needed, between agency data systems and DES/AzEIP data requirements. These crosswalks are developed by the DES/AzEIP data manager and the agency data managers. Crosswalks are currently required between DES/AzEIP and the Division of Developmental Disabilities (DDD) for exit and IFSP data. A revision of the DDD data system is in process; DES/AzEIP is working with DDD to include all AzEIP data elements and eliminate the need for crosswalks.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2005:

All AzEIP service providing state agencies and contractors are required to submit electronic data to DES/AzEIP on a monthly basis. AzEIP service providing agencies (DDD, ADHS, and ASDB) and contractors submit child data to DES/AzEIP utilizing AzEIP's file layout to prepare the 618 data reports. Service providing agencies are also required to submit monitoring progress reports to DES/AzEIP on a regular basis according to the parameters in their Corrective Action Plan. For agencies which have corrected all previously identified noncompliance and closed out their corrective action plan, annual program self-assessments are required. All agencies are currently complying with the request in a timely manner.

Improvement Activities	Timelines	Status
Provide technical assistance, as needed, to resolve production problems, retest, and retrain.	December 2005 and ongoing.	Ongoing.
 Evaluate Results of ACTS system revision. Check reports for accuracy. Check if data is properly entered and validated. Develop plan to correct, if needed. Technical Assistance, if needed. Fix production problems and retest and retrain, if needed. 	January 2006	Completed. See below for Revisions with Justification.
Work with DES Division of Developmental Disabilities (DDD) to revise the DDD data system to	July 2005- June 2006	Concepts and Requirements document

ensure inclusion of required data elements, reports, and transfer of data to and from DES/AzEIP.		developed and approved. Functional specifications document developed. See below for Revisions with Justification.
Implement and monitor the revised DDD system.	June 2006 and	In process. See below for
Provide technical assistance, as needed, to resolve production problems, retest and retrain.	ongoing.	Revisions with Justification.
Monitoring protocol for Site Visits includes verification of individual child electronic records.	Ongoing.	Completed.
Incorporated herein are the improvement activities		
from Indicator # 9 regarding continuing		
implementation of the monitoring system.		
Revise and expand policies and procedures		
related to data collection.	F.L	O I . I I
Revise data collection policies and	February 2006	Completed.
procedures, as needed, and incorporate into policy and procedure manual.		
Align policies and procedures across all	February 2006	Completed.
agencies and providers regarding data		
collection.		
Disseminate and implement revised policies and procedures related to data collection	February 2006 and ongoing.	Completed and ongoing.
across the service providing agencies.		
Monitor through CMQIS (see Indicator #9) to	In accordance with	Implemented.
ensure implementation of policies and procedures.	monitoring cycles.	

Revisions, <u>with Justification</u>, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2006 - 2010

Improvement Activities	Timelines	Resources
 Evaluate Results of ACTS system revision. Check reports for accuracy. Check if data is properly entered and validated. Develop plan to correct, if needed. Technical Assistance, if needed. Fix production problems and retest and retrain, if needed. Justification for Requested Revision to Timeline: Timeline revised to reflect need for ongoing evaluation. 	Ongoing.	Technical Assistance Specialist, Management Information Coordinator, and programmer.
Work with DES Division of Developmental Disabilities (DDD) to revise the DDD data system to ensure inclusion of required data elements, reports and transfer of data to and from DES/AzEIP. Justification for Requested Revision to Timeline:	July 2006 – December 2007	Technical Assistance Specialist, Management Information Coordinator, DDD MIS staff.

_____ARIZONA State

Part C State Annual Performance Report (APR) for FFY 2005

Timeline revised due to resource constraints.		
New data entry screens implemented by DDD in September 2006 to collect required data elements and to provide bridge to permanent DDD data system changes. New activity needed due to revision of timeline for permanent changes to DDD data system.	September 2006	Technical Assistance Specialist, Management Information Coordinator, DDD MIS staff.
Training provided to service coordinators during September through November. User manual released in November 2006. New activity	September – November 2006	DDD Help Desk Staff, DES/AzEIP Technical Assistance Specialist.
Implement and monitor the revised DDD system. Provide technical assistance, as needed, to resolve production problems, retest and retrain.	September 2006 and ongoing.	DDD Help Desk Staff, DES/AzEIP Technical Assistance Specialist, Management Information
Justification for Requested Revision to Timeline: Timeline revised to align with adjusted timelines with DDD system.		Coordinator.